



What is hepatitis B?

Hepatitis B (formerly known as serum hepatitis) is a viral infection of the liver caused by the hepatitis B virus. Hepatitis B can lead to lifelong (chronic) infection and can cause serious liver damage (cirrhosis or liver cancer) and death.

Who is at risk for hepatitis B?

Anyone can get hepatitis B, but those at greater risk include:

- People with multiple sex partners or sexually transmitted disease(s).
- Men who have sex with men.
- Sex contacts of infected people.
- Injection drug users.
- Household contacts of chronically infected people.
- Infants born to infected mothers.
- Health-care and public safety workers who have contact with infected blood.
- Hemodialysis patients.

What are the symptoms of hepatitis B?

About 30 percent of people have no signs or symptoms. Adults and teens are more likely to have symptoms. Symptoms may include tiredness, loss of appetite, nausea, abdominal discomfort, vomiting, joint pain, rash, dark urine or jaundice (i.e., yellowing of skin or whites of eyes). Young children may show few or no signs or symptoms. Some people recover fully, but some carry the virus in their blood for a lifetime. Age at the time of infection is a major factor in progression to chronic infection.

How soon do symptoms appear?

Symptoms may appear six weeks to six months after exposure, but usually appear within 60 to 90 days.

How is hepatitis B spread?

Hepatitis B virus can be found in the blood and, to a lesser extent, in the saliva, semen and other body fluids of an infected person. It is spread by direct contact with infected body fluids, usually by needle stick injury, sharing needles or sexual contact. Hepatitis B virus is not spread by casual contact or by respiratory secretions.

When and for how long is a person able to spread the disease?

The virus can be found in blood and other body fluids weeks before symptoms appear and generally persists for several months afterward. About 10 percent of infected people may become long-term carriers of the virus and may remain contagious for the course of their lifetime.

How is a person diagnosed?

A health-care professional can make a positive diagnosis using several blood tests.

What is the treatment?

There are no special medicines or antibiotics that can be used to treat a person once the symptoms appear. For people with lifelong (chronic) infection, up to 40 percent achieve long-term remission after treatment with special medications.

Does past infection make a person immune?

Yes. The person is still at risk for other hepatitis infections (such as A and C), however.

Should children or others be excluded from day care, school, work or other activities if they have hepatitis B?

A child with known hepatitis B should be excluded if he or she exhibits any of the following:

- Weeping sores that cannot be covered
- Biting or scratching behavior
- A bleeding problem
- Generalized dermatitis that may produce wounds or weepy tissue fluids
- Unable to participate in routine activities, needs more care than can be provided by staff, or meets other exclusion criteria, such as fever with behavioral change

The child can be readmitted to a group setting when skin sores are dry or covered, when the child is cleared to return by a health professional, or when the child is able to participate in activities.

What can be done to prevent the spread of Hepatitis B?

A vaccine to prevent hepatitis B has been available for several years. It is safe and effective and is recommended for infants, children and adolescents. Adults at increased risk of infection who have not already been infected also should be immunized. A special hepatitis B immune globulin (HBIG) is also available for people who are exposed to the virus. In the event of exposure to hepatitis B, consult a doctor or the local health department.

Additional Information:

Additional information is available at www.ndhealth.gov/disease or by calling the North Dakota Department of Health at 800.472.2180.

This disease is a reportable condition. As mandated by North Dakota law, any incidence of this disease shall be reported to the North Dakota Department of Health.

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